

16627-2US

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Attorney	Docket No.	
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IRCH, STEWART, KOLASCH & BIRCH, LLP

PLEASE NOTE: YOU MUST COMPLETE THE POLLOWING P.O. Box 747 • Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

	inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:						
Insert Title:	CLOSTRIDIUM BOTUL	INUM C3 EXOTRANSFERASE COMPO	SITIONS AND METHODS FOR TREATING	TUMOUR SPREADING			
Fill in A ppropri ate	the specification of which above and/or the following		to, the application is identified by the attor	ney docket number as set forth			
Information -	The specification w	as filed on		as			
For Use Without		ication Number		· ;			
Specification Attached:	and amended on _			(if applicable) and/or			
		as filed on September 29, 2004		as PCT; and was			
	amended on July			(if applicable)			
	I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56. I do not know and do not believe the same was ever known or used in the United States of America before my or our invention thereof, or patented or described in any printed publication in any country before my or our invention thereof or more than one year prior to this application, that the same was not in public use or on sale in the United States of America more than one year prior to this application, that the invention has not been patented or made the subject of an inventor's certificate issued before the date of this application in any country foreign to the United States of America on an application filed by me or my legal representative or assigns more than twelve months (six months for designs) prior to this application, and that no application for patent or inventor's certificate on this invention has been filed in any country foreign to the United States of America prior to this application by me or my legal representatives or assigns, except as follows. I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) of any foreign application(s) for patent or						
	inventor's certificate liste	ed below and have also identified below	w any foreign application for patent or inv	entor's certificate having a filing date			
	before that of the application Prior Foreign Application	ition on which priority is claimed:		Priority Claimed			
Insert Priority Information:	60/506,162	.U. S. A.	09/29/2003	X			
(if appropriate)	(Number)	(Country)	(Month/Day/Year Filed)	Yes No			
			08/02/2004				
•	10/902,878 (Number)	U.S.A. (Country)	(Month/Day/Year Filed)	×			
	(ranniper)	(country)	(Month) Day/ Tear Flied)	Yes No			
	(Number)	(Country)	(Month/Day/Year Filed)	Yes No			
	(Number)	(Country)	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	Ļ Ļ			
	(Muniber)	(Coming)	(Month/Day/Year Filed)	Yes No			
	I hereby claim the benefi	t under Title 35, United States Code, §	119(e) of any United States provisional app	plications(s) listed below.			
Insert Provisional							
Application(s): (if any)	(Application Number)		(Filing Date)				
(Many)				•			
	(Application Number)		(Filing Date)	•			
		, if any, for any Patent or Inventor's C	ertificate Filed More than 12 Months (6 M	lonths for Designs) Prior to the Filing			
	Country	Application Numbe	r Date of Filing (Mor	nth/Day/Year\			
Insert Requested Information: (if appropriate)			tradi				
Insert Prior U.S.	in-part application(s) list States and/or PCT appli to disclose information w	ed below and, insofar as the subject ma cation in the manner provided by the f thich is material to the patentability as (20 of any United States and/or PCT applatter of each of the claims of this application inst paragraph of Title 35, United States Codefined in Title 37, Code of Federal Regula or PCT international filing date of this app	n is not disclosed in the prior United ode, §112, I acknowledge the duty tions, §1.56 which became available			
Application(s): (if any)	(Application Number)	(Filing Date)	(Status - patented,	pending, abandoned)			
Page 1 of 4	(Application Number)	(Filing Date)	Status - notanted	pending, abandoned)			

Attorney Docket No.

I hereby appoint the practitioners at CUSTOMER NO. 02292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the United States Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

Send Correspondence to:

CUSTOMER NO. 02292 (BIRCH, STEWART, KOLASCH & BIRCH, LLP)

Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of First or Sole Inventor: Insert Name of

Attorney	Docket No.	

Full Name of Both Inventor, if any: see above	GIVEN NAME/FAMILY NAME LISA MCKERRACHER	INVENTORSSIGNATURE	- Lily 223006		
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	MAILING ADDRESS (Complete Street Ad	dress including City, State & Country)			
Pull Name of Ninth Inventor, if any: six above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*		
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	MAILING ADDRESS (Complete Street Address including City, State & Country)				
Full Name of Teath Inventor, if eny: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*		
	Residence (City, State & Country)		CITIZENSHIP		
	MAILING ADDRESS (Complete Street Add	dress including City, State & Country)			

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*DATE OF SIGNATURE